



Town of Middletown
7875 Church Street
Middletown, Virginia 22645
(540) 869-2226 ♦ Fax (540) 869-4306
Gateway to Cedar Creek and Belle Grove National Historical Park

MEALS TAX RETURN

Name of Business: _____

Mailing Address: _____

Business Telephone: _____ Email: _____

RETURN FOR THE MONTH OF _____
(Month) (Year)

1. Total Gross Sales _____
2. Total Deductions _____
3. Amount on which tax is computed _____
4. Tax _____
(5% of line 3)
5. Penalty for late filing and payment _____
(10% of line 4, whichever is greater)
6. Interest for late filing and payment _____
(12% per annum line 5)
7. Total tax, penalty and interest due and payable _____
8. Credit for filing and paying on or before the 20th _____
(5% of line 4)
9. Total due and payable _____

I hereby declare that this meals tax return has been examined by me and to the best of my knowledge is a true, correct and complete return.

(Date)

(Printed Name)

(Signature)

NOTE: This return must be filed even when no sales were made during the period. If a change of ownership has occurred, the new owner must register with the Town and the prior owner must advise the Town Office when making a Final Return. The Return must be signed and accompanied by the correct amount of payment due. Checks should be made payable to **TOWN OF MIDDLETOWN**, and either mailed or hand delivered to 7875 Church Street, Middletown, Virginia 22645, not later than the 20th of the month following the month covered in the Return.

Joan Roche, Town Manager * Rebecca L. Layman, Municipal Clerk * Sharon K. Fadely, Treasurer
R. Phillip Breeden, Chief of Police * Donald Riffey, Superintendent of Public Works